

Shp 1518

Work Order ID 84145

84145

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Item ID: D412-761-041

Accept

N900040100

Setup Start *NS1*

Revision ID:

Stop *NS2*

Item Name: Full Vertical Reference Door, LH

Start Date: 03/05/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 17/05/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: ML5

Date: 12/05/04

Tooling:

Date:

Run Start *NR1*

QC:

Date:

SPC (Y/N):

Date:

Stop *NR2*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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IIN D412-761	Rev D
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100	DOCUMENT CONTROL	0.00
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100

DC

Memo

0.00

Document Control

Photocopy bluefile & type labels per PPP D412-761-041 CHG001

8/2/06/04

ML5 12/06/04

110	Pick Kit	0.00
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110

Packaging

Memo

0.00

Packaging

12/6/18

120	QC4- 100% Inspect kits for completeness	0.00
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120

QC

Memo

0.00

Quality Control

8/2/06/04

(4)

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Work Order ID 84145

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Item ID: D412-761-041

Accept

N900040100

Setup Start ***NS1***

Revision ID:

Item Name: Full Vertical Reference Door, LH

Stop ***NS2***

Start Date: 03/05/2012 Start Qty: 1.00

1

Cust Item ID:

Required Date: 17/05/2012 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: _____ Date: _____ Tooling: _____ Date: _____

Run Start ***NR1***

QC: _____ Date: _____ SPC (Y/N): _____ Date: _____

Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
130		0.00							
130	Packaging								
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D412-761-041								
	Location: _____								
	PPP Rev: _____								
140		0.00							
140	QC21- Final Inspection - Work Order Release								
QC	Memo	0.00							
Quality Control									

2/6/40

MS 12/06/04

MF
12-06-04

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries

Picklist Print

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Work Order ID: 84145

84145

Parent Item: D412-761-041

D412-761-041

Parent Item Name: Full Vertical Reference Door, LH

Start Date: 03/05/2012

Required Date: 17/05/2012

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:A 09-01-13 rev.C as per dwg DD verified by:EC IPP Rev:B as per ECN10-573 DD 10.05.18 verf:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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D412-761-045

CHG 001

Manufactured No

110

Each

4.0000

1

1

D412-761-045

Large Bubble Window, LH

Location

Loc Qty

Loc Code

FG091

2

77200

2

FG110

2

81608

2

D412-761-047

CHG 001

Manufactured No

110

Each

5.0000

1

D412-761-047

Door Mounted Instrument Panel

Location

Loc Qty

Loc Code

FG031A

5

57755

5

D412-761-049

CHG 002

Manufactured No

110

Each

5.0000

1

D412-761-049

Armrest

Location

Loc Qty

Loc Code

FG021A

5

56679

1

56896

3

57756

1

W/O:		WORK ORDER CHANGES					
DATE	STEP	PROCEDURE CHANGE	By	Date	Qty	Approval Chief Eng / Prod Mgr	Approval QC Inspector

Part No: _____ PAR #: _____ Fault Category: _____ NCR: Yes No DQA: _____ Date: _____

Resolution: _____ Disposition: _____ QA: N/C Closed: _____ Date: _____

NCR:		WORK ORDER NON-CONFORMANCE (NCR)						
DATE	STEP	Description of NC Section A	Corrective Action Section B			Verification Section C	Approval Chief Eng	Approval QC Inspector
			Initial Chief Eng	Action Description Chief Eng	Sign & Date			

NOTE: Date & initial all entries